



APPLICATION FOR DEMOLITION PERMIT

Date of Application: _____

CITY OF FAIRFIELD / PLANNING & ZONING
407 Soldier Road / P.O. Box 336 / Fairfield, Idaho 83327

OWNER(s): Name: _____
Mailing Address: _____
Telephone #: _____ Cell: _____
Email: _____

CONTRACTOR: _____
Mailing Address: _____
Telephone #: _____ Cell: _____
Email: _____

WORK TO BE DONE: _____

ADDRESS PHYSICAL: _____
LEGAL: LOT #: _____ BLOCK #: _____ SUBDIVISION: _____

Flood Plain or Stream Bed: No Yes Zoning: Residential Commercial Industrial

DEMOLITION CHECKLIST:

- Site Plan (that includes property lines, easements, utilities, and public right-of-way)
- Signed Construction Waste Management Plan
- Water / Sewer Disconnected
- Electrical Service Disconnected
- Asbestos Report Completed

The Completion of this Application Does Not Constitute a Demolition Permit.

I HERBY ACKNOWLEDGE that I have filled in this application accurately to the best of my knowledge and I agree to comply with all City Ordinances and State laws regulating building demolition within the City of Fairfield, Idaho. Any waivers or variances must be specifically described and approved by the proper authority.

Signature of Owner or Authorized Agent Date: ____/____/____

Approved Denied _____ Date: ____/____/____
Planning and Zoning Representative

Note: Demolition Permits are valid for 90 days from the date issued. Where no work has been started and/or inspected within 90 days after the issuance of a demolition permit or when more than 90 days lapses between approval of required inspections, such demolition permit shall be null and void.

Official Use Only:
Application Fee Received: _____
Permit Number: _____
Date Issued: _____